

B1 (Official Form 1)(04/13)

United States Bankruptcy Court District of New Jersey		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Ivery, Donna Yvette		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): AKA Donna Ivery-Little; AKA Donna Little		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) xxx-xx-3461		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 46 Basswood Terrace Wayne, NJ <div style="text-align: right;">ZIP Code 07470</div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right;">ZIP Code</div>
County of Residence or of the Principal Place of Business: Passaic		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (<i>amount subject to adjustment on 4/01/16 and every three years thereafter</i>). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition*(This page must be completed and filed in every case)*

Name of Debtor(s):

Ivery, Donna Yvette**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **- None -**

Case Number:

Date Filed:

Location

Where Filed:

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor:

- None -

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X /s/ Barbara A. Edwards**July 31, 2015**

Signature of Attorney for Debtor(s)

(Date)

Barbara A. Edwards**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Ivery, Donna Yvette

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Donna Yvette Ivery

Signature of Debtor **Donna Yvette Ivery**

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 31, 2015

Date

Signature of Attorney*

X /s/ Barbara A. Edwards

Signature of Attorney for Debtor(s)

Barbara A. Edwards

Printed Name of Attorney for Debtor(s)

Muscarella, Bochet, Edwards & D'Alessandro, P.C.

Firm Name

**10-04 River Road
Fair Lawn, NJ 07410**

Address

(201)796-3100

Telephone Number

July 31, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court
District of New Jersey**

In re Donna Yvette Ivery

Debtor(s)

Case No.

Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Donna Yvette Ivery
Donna Yvette Ivery

Date: July 31, 2015

United States Bankruptcy Court
District of New Jersey

In re **Donna Yvette Ivery**,
Debtor

Case No. _____

Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	549,900.00		
B - Personal Property	Yes	3	17,774.12		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		121,656.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		33,450.63	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	30		297,064.87	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			7,481.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			10,695.00
Total Number of Sheets of ALL Schedules		46			
Total Assets			567,674.12		
Total Liabilities				452,171.50	

**United States Bankruptcy Court
District of New Jersey**

In re **Donna Yvette Ivery**,
Debtor

Case No. _____

Chapter **7**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	33,450.63
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	33,450.63

State the following:

Average Income (from Schedule I, Line 12)	7,481.00
Average Expenses (from Schedule J, Line 22)	10,695.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	7,481.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	33,450.63	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		297,064.87
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		297,064.87

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
46 Basswood Terrace Wayne, New Jersey (1/2 Owner with Paul C. Little)		-	549,900.00	Unknown

Sub-Total > **549,900.00** (Total of this page)

Total > **549,900.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account	-	32.12
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Household Goods and Furnishings	-	1,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Wearing Apparel	-	1,000.00
7. Furs and jewelry.		Jewelry	-	200.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

Sub-Total > **2,732.12**
(Total of this page)

2 continuation sheets attached to the Schedule of Personal Property

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Lawsuit Against Ex-Husband	-	0.00

Sub-Total > **0.00**
(Total of this page)

Sheet 1 of 2 continuation sheets attached
to the Schedule of Personal Property

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2008 Mercedes GL450	-	15,042.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > **15,042.00**
(Total of this page)
Total > **17,774.12**

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☒ 11 U.S.C. § 522(b)(2)

☐ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Real Property</u>			
46 Basswood Terrace	11 U.S.C. § 522(d)(1)	0.00	549,900.00
Wayne, New Jersey			
(1/2 Owner with Paul C. Little)			
<u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u>			
Checking Account	11 U.S.C. § 522(d)(5)	32.12	32.12
<u>Household Goods and Furnishings</u>			
Household Goods and Furnishings	11 U.S.C. § 522(d)(3)	1,500.00	1,500.00
<u>Wearing Apparel</u>			
Wearing Apparel	11 U.S.C. § 522(d)(3)	1,000.00	1,000.00
<u>Furs and Jewelry</u>			
Jewelry	11 U.S.C. § 522(d)(4)	200.00	200.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u>			
2008 Mercedes GL450	11 U.S.C. § 522(d)(2)	3,675.00	15,042.00
	11 U.S.C. § 522(d)(5)	2,661.00	

Total: **9,068.12** **567,674.12**

0 continuation sheets attached to Schedule of Property Claimed as Exempt

B6D (Official Form 6D) (12/07)

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			2008 Mercedes GL450					
Mercedes Benz Financial Services P.O. Box 5209 Carol Stream, IL 60197-5209		-						
			Value \$ 15,042.00				8,706.00	0.00
Account No.			Representing: Mercedes Benz Financial Services				Notice Only	
Mercedes Benz Financial Services Schaumburg RPC-MBFS-5209 1301 E. Tower Road Schaumburg, IL 60173								
			Value \$					
Account No.			46 Basswood Terrace Wayne, New Jersey (1/2 Owner with Paul C. Little)					
Nationstar Mortgage 350 Highland Drive Lewisville, TX 75067		-						
			Value \$ 549,900.00				112,950.00	0.00
Account No.			Representing: Nationstar Mortgage				Notice Only	
Bank of America Home Loans P.O. Box 940335 Simi Valley, CA 93094-0335								
			Value \$					
Subtotal (Total of this page)							121,656.00	0.00

1 continuation sheets attached

B6D (Official Form 6D) (12/07) - Cont.

In re Donna Yvette Ivery,
Debtor

Case No. _____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.								
Bank of America Home Loans 7105 Corporate Drive MSN: PTX-C-35 Plano, TX 75024			Representing: Nationstar Mortgage				Notice Only	
			Value \$					
Account No.								
Phelan, Hallinan & Diamond 400 Fellowship Road, Suite 100 Mount Laurel, NJ 08054			Representing: Nationstar Mortgage				Notice Only	
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Subtotal (Total of this page)							0.00	0.00
Total (Report on Summary of Schedules)							121,656.00	0.00

Sheet 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Donna Yvette Ivery
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.								
Internal Revenue Service P.O. Box 120053 Stop 840F Covington, KY 41012		-					Unknown	Unknown
Account No.								
Internal Revenue Service P.O. Box 9021 Holtsville, NY 11742-9021			Representing: Internal Revenue Service				Notice Only	
Account No.								
State of New Jersey Division of Taxation P.O. Box 046 Trenton, NJ 08646-0046		-	2012 Taxes				850.13	850.13
Account No.								
State of New Jersey P.O. Box 283 Trenton, NJ 08695-0283		-	2010, 2011, 2012 & 2014 Taxes				32,600.50	32,600.50
Account No.								
New Jersey Division of Taxation Fair Lawn Invest. - D 22-08 Route 208 South Fair Lawn, NJ 07410			Representing: State of New Jersey				Notice Only	
Subtotal								0.00
(Total of this page)							33,450.63	33,450.63

Sheet 1 of 2 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Donna Yvette Ivery,
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. State of New Jersey Division of Taxation Federal Offset Program P.O. Box 283 Trenton, NJ 08695-0283								Unknown
		-					Unknown	Unknown
Account No. NJ Division of Taxation Fair Lawn Invest. - D 22-08 Route 208 South Fair Lawn, NJ 07410			Representing: State of New Jersey				Notice Only	
Account No. 								
Account No. 								
Account No. 								
Subtotal (Total of this page)							0.00	0.00
Total (Report on Summary of Schedules)							33,450.63	33,450.63

Sheet 2 of 2 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6F (Official Form 6F) (12/07)

In re Donna Yvette Ivery,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.							
Ace Homeowners Insurance P.O. Box 1685 616 Idaho Street Salem, VA 24153		-					108.75
Account No.							
ADT Security Services P.O. Box 371878 Pittsburgh, PA 15250-7878		-					563.18
Account No.							
Advanced Orthopaedic Associates 1777 Hamburg Turnpike Suite 301 Wayne, NJ 07470-5243		-					Unknown
Account No.							
American Express P.O. Box 1270 Newark, NJ 07101-1270		-					11,198.34
Subtotal (Total of this page)							11,870.27

29 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
American Express P.O. Box 981537 El Paso, TX 79998		Representing: American Express				Notice Only
Account No.						
Jaffe & Asher, LLP 600 Third Avenue New York, NY 10016-1901		Representing: American Express				Notice Only
Account No.						
American Express P.O. Box 1270 Newark, NJ 07101-1270	-					6,376.86
Account No.						
American Express P.O. Box 981537 El Paso, TX 79998		Representing: American Express				Notice Only
Account No.						
Jaffe & Asher, LLP 600 Third Avenue New York, NY 10016-1901		Representing: American Express				Notice Only
Sheet no. <u>1</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						6,376.86

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. American Express P.O. Box 1270 Newark, NJ 07101-1270	-					Unknown
Account No. American Housing Alliance 501 General Harris Street Longboat Key, FL 34228	-					Unknown
Account No. American Housing Alliance 3317 W. Beverly Boulevard Suite #202 Montebello, CA 90640		Representing: American Housing Alliance				Notice Only
Account No. AMI Cardiac Monitoring AMI Clinical Services 17810 Meeting House Road # 210 Sandy Spring, MD 20860	-					55.00
Account No. Amy L. Sauter, Esq. Pescatore & Sauter 286 Union Street Hackensack, NJ 07601	-					25,000.00
Sheet no. <u>2</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 25,055.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Andrew Wubbenhorst 17 Kiel Avenue Butler, NJ 07405	-					700.00
Account No.						
Aqua Pools, Inc. 44 Central Avenue Midland Park, NJ 07432	-					443.50
Account No.						
Atrium Health at Wayne 1120 Alps Road #B Wayne, NJ 07470	-					Unknown
Account No.						
AV Landscaping Services 50 Cottage Street Midland Park, NJ 07432	-					1,115.48
Account No.						
AV Landscaping Services 50 Cottage Street Midland Park, NJ 07432	-					6,025.23
Sheet no. <u>3</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						8,284.21

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Bank of America P.O. Box 15019 Wilmington, DE 19886-5019	-					19,179.59
Account No.						
Bank of America P.O. Box 982235 El Paso, TX 79998		Representing: Bank of America				Notice Only
Account No.						
Bank of America P.O. Box 15714 Wilmington, DE 19886-5714	-					9,935.45
Account No.						
Barry D. Epstein, Esq. The Epstein Law Firm 340 West Passaic Street Rochelle Park, NJ 07662	-					Unknown
Account No.						
Bastarrika & Soto 434 21st Avenue Paterson, NJ 07513	-					Unknown
Sheet no. <u>4</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						29,115.04

B6F (Official Form 6F) (12/07) - Cont.

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Bergen Gastroenterology 466 Old Hook Road Suite 1 Emerson, NJ 07630	-					Unknown
Account No.						
Body in Motion Sports & Orthopaedics 599 State Hwy 37 W 2nd Floor Toms River, NJ 08755-8011	-					49.00
Account No.						
Breathewell Corp 1200 East Ridgewood Avenue Ridgewood, NJ 07450-3957	-					7,000.00
Account No.						
Capital Bank 1 Church Street Rockville, MD 20850	-					119.00
Account No.						
Capital One P.O. Box 30281 Salt Lake City, UT 84130-0281	-					64.19
Sheet no. <u>5</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						7,232.19

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M
Account No. Capital One 1 South Orange Street Wilmington, DE 19801			Representing: Capital One				Notice Only
Account No. Penncro Associates, Inc. 95 James Way, Suite 113 Southampton, PA 18966-3847			Representing: Capital One				Notice Only
Account No. Penncro Associates, Inc. P.O. Box 1878 Southampton, PA 18966-9998			Representing: Capital One				Notice Only
Account No. Certified Credit & Collection Bureau P.O. Box 336 Raritan, NJ 08869		-					Unknown
Account No. Chase Bank P.O. Box 15153 Wilmington, DE 19886-5153		-					3,900.00
Sheet no. <u>6</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							3,900.00

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Chase Bank Customer Service Center P.O. Box 659732 San Antonio, TX 78265	-					Unknown
Account No.						
Chase Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153	-					3,885.00
Account No.						
Chase Bank P.O. Box 15298 Wilmington, DE 19850		Representing: Chase Cardmember Service				Notice Only
Account No.						
Chase Cardmember Service P.O. Box 15548 Wilmington, DE 19886-5548		Representing: Chase Cardmember Service				Notice Only
Account No.						
United Recovery Systems, LP P.O. Box 722929 Houston, TX 77272-2929		Representing: Chase Cardmember Service				Notice Only
Sheet no. <u>7</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						3,885.00

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.							
Chase Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153	-						26,619.62
Account No.							
ARS National Services P.O. Box 463023 Escondido, CA 92046			Representing: Chase Cardmember Service				Notice Only
Account No.							
Chilton Hospital P.O. Box 824638 Philadelphia, PA 19182-4638	-						3,151.15
Account No.							
Chilton Hospital P.O. Box 824638 Philadelphia, PA 19182-4638	-						70.00
Account No.							
Certified Credit & Collection Bureau P.O. Box 336 Raritan, NJ 08869			Representing: Chilton Hospital				Notice Only
Sheet no. <u>8</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							
Subtotal (Total of this page)							29,840.77

B6F (Official Form 6F) (12/07) - Cont.

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Chilton Hospital P.O. Box 824638 Philadelphia, PA 19182-4638	-					35.00
Account No.						
Chilton Memorial Hospital 97 West Parkway Pompton Plains, NJ 07444	-					Unknown
Account No.						
Columbia Dept. of Pediatrics 630 W 168th Street BHN1-112 New York, NY 10032	-					400.00
Account No.						
Professional Claims Bureau, Inc. P.O. Box 9060 Hicksville, NY 11802-9060		Representing: Columbia Dept. of Pediatrics				Notice Only
Account No.						
The Trustees of Columbia University P.O. Box 29752 New York, NY 10087-9752		Representing: Columbia Dept. of Pediatrics				Notice Only
Sheet no. 9 of 29 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						435.00

Debtor

Best Case Bankruptcy

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M
		D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.				
Account No.		Business Owned by Ex-Husband				Unknown
Covenant Reinsurance 46 Basswood Terrace Wayne, NJ 07470	-					
Account No.						Unknown
Daniels & Davis-Daniels, Esqs. KayKay Davis-Daniels, Esq. 527 Bangs Avenue, Suite 4 Asbury Park, NJ 07712	-					
Account No.						685.00
David Zuidema, Inc. 90 Midland Avenue Midland Park, NJ 07432	-					
Account No.						Unknown
Dianne Thomas, MD, LLC 165 State Street Suite 2 Hackensack, NJ 07601	-					
Account No.						Unknown
Dr. Esha Koshnu 1140 Bloomfield Avenue West Caldwell, NJ 07006	-					
Sheet no. <u>11</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						685.00

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Dr. Frank MacArthur 9 Post Road #6 Oakland, NJ 07436	-					Unknown
Account No.						
Dr. Gilbert Kepecs 385 Prospect Ave # 2 Hackensack, NJ 07601	-					Unknown
Account No.						
Dr. Grubez Edeer Asethetic Smile Design 246 Hamburg Turnpike - Suite 206 Wayne, NJ 07470	-					300.00
Account No.						
Eastern Christian School Association 50 Oakwood Avenue North Haledon, NJ 07508-2449	-					1,170.75
Account No.						
Eastern Christian School Association Come Stay & Play/After School Care 50 Oakwood Avenue North Haledon, NJ 07508-2449	-					158.00
Sheet no. <u>12</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						1,628.75

B6F (Official Form 6F) (12/07) - Cont.

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Eastern Christian School Association 50 Oakwood Avenue North Haledon, NJ 07508-2449	-					9,045.94
Account No.						
Regal Collections P.O. Box 1038 Fair Lawn, NJ 07410		Representing: Eastern Christian School Association				Notice Only
Account No.						
Smart Tuition Processing Center P.O. Box 117 Newark, NJ 07101		Representing: Eastern Christian School Association				Notice Only
Account No.						
Elliot Gourvitz, Esq. Gourvitz & Gourvitz 505 Morris Avenue, 1st Floor Springfield, NJ 07081	-					Unknown
Account No.						
Emer Phys Assoc North Jersey PC P.O. Box 740021 Cincinnati, OH 45274-0021	-					857.00
Sheet no. <u>13</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						9,902.94

Debtor

Best Case Bankruptcy

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.							
Healing Hands Rehab Inc. 1479 Rpite 23 S, #201 Wayne, NJ 07470	-						2,330.00
Account No.							
James L. Wyckoff 710 Smoke Hollow Trail Franklin Lakes, NJ 07417	-						Unknown
Account No.							
Janet Porro, Esq. 20 Lincoln Park Road Pequannock, NJ 07440	-						Unknown
Account No.							
JCP&L P.O. Box 3687 Akron, OH 44309	-						7,430.00
Account No.							
Jersey Central Power & Light P.O. Box 16001 Reading, PA 19612-6001	-						1,693.00
Sheet no. <u>15</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							
Subtotal (Total of this page)							11,453.00

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
JP Morgan Chase Bank P.O. Box 659754 San Antonio, TX 78265	-					Unknown
Account No.						
Kevin Sisco, Esq. 601 Hamburg Turnpike Wayne, NJ 07470	-					Unknown
Account No.						
Labcorp P.O. Box 2240 Burlington, NC 27216-2240	-					120.00
Account No.						
Lenscrafters/GEGRB P.O. Box 960061 Orlando, FL 32896-0061	-					823.09
Account No.						
Portfolio Recovery Associates, LLC P.O. Box 12914 Norfolk, VA 23541-1223		Representing: Lenscrafters/GEGRB				Notice Only
Sheet no. <u>16</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						943.09

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Lexington Insurance Company Homeowner's Insurance P.O. Box 414657 Boston, MA 02241	-					Unknown
Account No.						
Livia Eye Center 1 Ridgewood Avenue Paramus, NJ 07652	-					100.00
Account No.						
Macy's P.O. Box 183083 Columbus, OH 43218-3083	-					759.00
Account No.						
DSNB/Macy's P.O. Box 8218 Mason, OH 45040		Representing: Macy's				Notice Only
Account No.						
LTD Financial Services, LP 7322 Southwest Freeway Suite 1600 Houston, TX 77074-2053		Representing: Macy's				Notice Only
Sheet no. <u>17</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						859.00

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.							Notice Only
Northland Group, Inc. P.O. Box 390905 Mail Code F160 Minneapolis, MN 55439			Representing: Macy's				
Account No.							62.18
Medical and Hospital Credit Exchange 16 Broad Street - Suite 107 Keyport, NJ 07735		-					
Account No.							100.00
Medical Park Imaging P.O. Box 1259 Dept #88679 Oaks, PA 19456		-					
Account No.							59.23
Medical Park Imaging P.O. Box 1259 Dept #88679 Oaks, PA 19456		-					
Account No.							Unknown
Michael Confusione, Esq. 309 Fellowship Road Suite 200 Mount Laurel, NJ 08054		-					
Sheet no. <u>18</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							221.41
Subtotal (Total of this page)							

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Morgan & Morgan P.O. Box 4979 Orlando, FL 32802	-					Unknown
Account No.						
MRS Associates 1930 Olney Avenue Cherry Hill, NJ 08003	-					Unknown
Account No.						
National Registered Agents P.O. Box 927 West Windsor, NJ 08550	-					Unknown
Account No.						
Network Recovery Services, Inc. 3 Expressway Plaza, Suite 200 Roslyn Heights, NY 11577	-					Unknown
Account No.						
Neurology Group of Bergen County 1200 East Ridgewood Avenue 2nd Floor, East Wing Suite 208 Ridgewood, NJ 07450-3957	-					400.00
Sheet no. <u>19</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						400.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
New Jersey Victims of Crime Compensation 25 Market Street 7th Floor West Wing Trenton, NJ 08625	-					Unknown
Account No.						
New York Presbyterian P.O. Box 3475 Toledo, OH 43607-0475	-					1,943.98
Account No.						
Network Recovery Services, Inc. 3 Expressway Plaza Suite 200 Roslyn Heights, NY 11577-2050		Representing: New York Presbyterian				Notice Only
Account No.						
Nordstrom Bank P.O. Box 79137 Phoenix, AZ 85062-9137	-					2,884.63
Account No.						
Northwestern Mutual 720 E Wisconsin Ave Milwaukee, WI 53202	-					Unknown
Sheet no. 20 of 29 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						4,828.61

B6F (Official Form 6F) (12/07) - Cont.

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. OpenSky P.O. Box 2711 Omaha, NE 68103-2711	-					250.76
Account No. Optimum-Cablevision P.O. Box 3711378 Pittsburgh, PA 15250	-					Unknown
Account No. Oradell Animal Hospital 580 Winters Avenue Paramus, NJ 07652	-					600.00
Account No. Orthodontica 43 Yawpo Ave #5 Oakland, NJ 07436	-					1,708.00
Account No. Pescatore & Sauter, LLC 286 Union Street Hackensack, NJ 07601	-					17,601.50
Sheet no. 21 of 29 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						20,160.26
Subtotal (Total of this page)						20,160.26

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Petron Associates P.O. Box 5598 Newark, DE 19714	-					360.00
Account No.						
Portfolio Recovery Associates P.O. Box 12914 Norfolk, VA 23541	-					1,091.96
Account No.						
PSE&G P.O. Box 14444 New Brunswick, NJ 08906	-					1,132.31
Account No.						
PSE&G P.O. Box 14444 New Brunswick, NJ 08906	-					Unknown
Account No.						
Quest Diagnostics P.O. Box 7308 Hollister, MO 65673	-					Unknown
Sheet no. <u>22</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						2,584.27

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Raymour & Flanagan Furniture P.O. Box 130 Liverpool, NY 13088-0130	-					1,483.19
Account No.						
Simons Agency Inc. 4963 Wintersweet Drive 627355 Liverpool, NY 13088		Representing: Raymour & Flanagan Furniture				Notice Only
Account No.						
Ronald Ricci, Joseph Fava & Brooke Bagley 482 Notch Road Woodland Park, NJ 07424	-					Unknown
Account No.						
Silen SurgiCare Center 1117 Route 46 East Clifton, NJ 07013	-					Unknown
Account No.						
Smart Tuition Processing Center P.O. Box 11731 Newark, NJ 07101	-					11,000.00
Sheet no. <u>23</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						12,483.19

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
St. Joseph's Regional Medical Center P.O. Box 36284 Newark, NJ 07188	-					4,191.00
Account No.						
The City of Paterson Ambulance Service 155 Market Street Paterson, NJ 07505	-					900.00
Account No.						
The Credit Pros 60 Park Place Suite 200 Newark, NJ 07102	-					Unknown
Account No.						
The Lehr Law Firm 33 Clinton Road #100 West Caldwell, NJ 07006	-					Unknown
Account No.						
The Valley Hospital P.O. Box 18998 Newark, NJ 07191-8998	-					400.00
Sheet no. <u>24</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						5,491.00

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
The Valley Hospital 223 N Van Dien Avenue Ridgewood, NJ 07450		Representing: The Valley Hospital				Notice Only
Account No.						
The Valley Hospital P.O. Box 18998 Newark, NJ 07191-8998		-				35.00
Account No.						
The Valley Hospital 223 N Van Dien Avenue Ridgewood, NJ 07450		Representing: The Valley Hospital				Notice Only
Account No.						
The Valley Hospital 223 N Van Dien Avenue Ridgewood, NJ 07450		-				Unknown
Account No.						
Township of Wayne Utility Billing Department 475 Valley Road Wayne, NJ 07470		-				5,000.00
Sheet no. <u>25</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						5,035.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Township of Wayne Tax Office 475 Valley Road Wayne, NJ 07470	-					80,000.00
Account No.						
Verizon P.O. Box 4830 Trenton, NJ 08650-4830	-					858.00
Account No.						
Diversified Consultants, Inc. P.O. Box 551268 Jacksonville, FL 32256-1268		Representing: Verizon				Notice Only
Account No.						
Jefferson Capital System 16 McLeland Road Saint Cloud, MN 56303		Representing: Verizon				Notice Only
Account No.						
Verizon P.O. Box 408 Newark, NJ 07101-0408		Representing: Verizon				Notice Only
Sheet no. 26 of 29 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						80,858.00

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.		-					3,811.52
Verizon Wireless 500 Technology Drive, Suite 550 Weldon Spring, MO 63304							
Account No.			Representing: Verizon Wireless				Notice Only
The CBE Group, Inc. Payment Processing Center P.O. Box 2038 Waterloo, IA 50704-2038							
Account No.			Representing: Verizon Wireless				Notice Only
Verizon P.O. Box 408 Newark, NJ 07101-0408							
Account No.			Representing: Verizon Wireless				Notice Only
Verizon Wireless P.O. Box 25505 Lehigh Valley, PA 18002-5505							
Account No.			Representing: Verizon Wireless				Notice Only
Verizon Wireless P.O. Box 49 Lakeland, FL 33802							
Sheet no. <u>27</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)			3,811.52

B6F (Official Form 6F) (12/07) - Cont.

In re **Donna Yvette Ivery**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Verizon Wireless 500 Technology Drive, Suite 550 Weldon Spring, MO 63304	-					1,013.49
Account No.						
Diversified Collection Services, Inc. P.O. Box 551268 Jacksonville, FL 32255-1268		Representing: Verizon Wireless				Notice Only
Account No.						
Verizon Wireless 500 Technology Drive, Suite 550 Weldon Spring, MO 63304	-					670.00
Account No.						
Sunrise Credit Services P.O. Box 9100 Farmingdale, NY 11735		Representing: Verizon Wireless				Notice Only
Account No.						
Weichert Realtors 991 Hamburg Turnpike Wayne, NJ 07470	-					Unknown
Sheet no. 28 of 29 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						1,683.49

B6F (Official Form 6F) (12/07) - Cont.

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
Weinberg, Lieverman & Co 155 Passaic Street Suite 420 Fairfield, NJ 07004	-					Unknown
Account No.						
Wells Fargo P.O. Box 6995 Portland, OR 97228	-					Unknown
Account No.						
Account No.						
Account No.						
Sheet no. <u>29</u> of <u>29</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						0.00
						Total (Report on Summary of Schedules)
						297,064.87

In re Donna Yvette Ivery, Case No. _____
Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
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In re Donna Yvette Ivery,
Debtor

Case No. _____

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Paul C. Little	Nationstar Mortgage 350 Highland Drive Lewisville, TX 75067

Fill in this information to identify your case:

Debtor 1 Donna Yvette Ivery

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

- ☒ Employed
- ☐ Not employed

Debtor 2 or non-filing spouse

- ☐ Employed
- ☐ Not employed

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ 1,625.00	\$ N/A
3. Estimate and list monthly overtime pay.	+\$ 0.00	+\$ N/A
4. Calculate gross income. Add line 2 + line 3.	\$ 1,625.00	\$ N/A

Debtor 1 **Donna Yvette Ivery**

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 1,625.00	\$ N/A
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ N/A
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ N/A
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ N/A
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ N/A
5e. Insurance	5e. \$ 0.00	\$ N/A
5f. Domestic support obligations	5f. \$ 0.00	\$ N/A
5g. Union dues	5g. \$ 0.00	\$ N/A
5h. Other deductions. Specify:	5h.+ \$ 0.00	+ \$ N/A
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ N/A
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 1,625.00	\$ N/A
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ N/A
8b. Interest and dividends	8b. \$ 0.00	\$ N/A
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 5,856.00	\$ N/A
8d. Unemployment compensation	8d. \$ 0.00	\$ N/A
8e. Social Security	8e. \$ 0.00	\$ N/A
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ N/A
8g. Pension or retirement income	8g. \$ 0.00	\$ N/A
8h. Other monthly income. Specify:	8h.+ \$ 0.00	+ \$ N/A
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 5,856.00	\$ N/A
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 7,481.00 + \$ N/A	= \$ 7,481.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify:		
	11. +\$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and <i>Related Data</i> , if it applies	12. \$ 7,481.00	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain:		

Fill in this information to identify your case:

Debtor 1 Donna Yvette Ivery

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

14

☐ No
☒ Yes

Daughter

17

☐ No
☒ Yes

☐ No
☐ Yes

☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☐ Yes ☒ No

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 6,796.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 142.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Donna Yvette Ivery**

Case number (if known)

6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	620.00
6b. Water, sewer, garbage collection	6b. \$	200.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	300.00
6d. Other. Specify: _____	6d. \$	0.00
7. Food and housekeeping supplies	7. \$	400.00
8. Childcare and children's education costs	8. \$	0.00
9. Clothing, laundry, and dry cleaning	9. \$	15.00
10. Personal care products and services	10. \$	0.00
11. Medical and dental expenses	11. \$	225.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	400.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
14. Charitable contributions and religious donations	14. \$	200.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	200.00
15d. Other insurance. Specify: _____	15d. \$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
	16. \$	0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	895.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify: _____	17c. \$	0.00
17d. Other. Specify: _____	17d. \$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).		
	18. \$	0.00
19. Other payments you make to support others who do not live with you.		
	\$	0.00
Specify: _____		
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
21. Other: Specify: Pet Care		
	21. +\$	152.00
Daughter's Therapy		
	+\$	150.00
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.		
	22. \$	10,695.00
23. Calculate your monthly net income.		
23a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I.	23a. \$	7,481.00
23b. Copy your monthly expenses from line 22 above.	23b. -\$	10,695.00
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .		
	23c. \$	-3,214.00
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.		
Explain: _____		

**United States Bankruptcy Court
District of New Jersey**

In re **Donna Yvette Ivery**

Debtor(s)

Case No.
Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **48** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **July 31, 2015**

Signature **/s/ Donna Yvette Ivery**

Donna Yvette Ivery

Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
District of New Jersey**

In re **Donna Yvette Ivery**

Debtor(s)

Case No.

Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
\$-857.00

SOURCE
2013 Business Income

2. Income other than from employment or operation of business

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
\$14,000.00

SOURCE
2013 Alimony

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3. Payments to creditors

None

Complete a. or b., as appropriate, and c.



a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None



b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
------------------------------	------------------------------	-----------------------------------	--------------------

None



c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
David Zuidema, Inc. vs. Donna Ivery & Paul Little SC-350-15		Superior Court of New Jersey Law Division : Passaic County Special Civil Part	
Portfolio Recovery Associates vs. Donna Little DC-005825-14		Superior Court of New Jersey Law Division : Passaic County Special Civil Part	
American Express vs. Donna Little PAS-DC-011327-14		Superior Court of New Jersey Law Division : Passaic County Special Civil Part	
American Express vs. Donna Little DC-11227-14		Superior Court of New Jersey Law Division : Passaic County Special Civil Part	

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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5. Repossessions, foreclosures and returns

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
---	--	--------------------------------------

6. Assignments and receiverships

None ☐ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None ☐ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------	--	------------------	--------------------------------------

7. Gifts

None ☐ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

None ☐ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
--------------------------------------	--	--------------

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Muscarella, Bochet, Edwards & D'Alessandro, P.C. Credit Counseling		

10. Other transfers

None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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None ☐ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
----------------------------------	---------------------------	---

11. Closed financial accounts

None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
---------------------------------	--	---------------------------------------

12. Safe deposit boxes

None ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None ☐ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None ☐ List all property owned by another person that the debtor holds or controls.

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NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

- None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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16. Spouses and Former Spouses

- None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None ☐ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
---------------------------------------	---------------	-----------------------

B7 (Official Form 7) (04/13)

6

18 . Nature, location and name of business

None

☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Donna Bella Inc.		46 Basswood Terrace Wayne, NJ 07470	Empowering young women.	
The Elite Gymnast & Parents Association			Business for Gymnastic Fundraisers	
Covenant Reinsurance	27-0229099	46 Basswood Terrace Wayne, NJ 07470	Ex-Husband's Reinsurance Business	
Veritas Academy, Inc.	35-2357275	P.O. Box 465 Oakland, NJ 07436	Homeschool/Tutoring Center	1998 - Present
Mount Zion Ministries	35-2357275	P.O. Box 465 Oakland, NJ 07436	Homeschool Ministry	December 1995 -
Quest for Excellence		46 Basswood Terrace Wayne, NJ 07470	Tutoring Service	September 2014

None

☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date July 31, 2015

Signature /s/ Donna Yvette Ivery
Donna Yvette Ivery
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

**United States Bankruptcy Court
District of New Jersey**

In re **Donna Yvette Ivery**

Debtor(s)

Case No.

Chapter

7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: Mercedes Benz Financial Services	Describe Property Securing Debt: 2008 Mercedes GL450
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt	

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: -NONE-	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date **July 31, 2015**

Signature **/s/ Donna Yvette Ivery**

Donna Yvette Ivery

Debtor

United States Bankruptcy Court
District of New Jersey

In re Donna Yvette Ivery

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- | | | |
|---|----|-----------------|
| For legal services, I have agreed to accept | \$ | <u>1,400.00</u> |
| Prior to the filing of this statement I have received | \$ | <u>1,400.00</u> |
| Balance Due | \$ | <u>0.00</u> |
2. The source of the compensation paid to me was:
- ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [Other provisions as needed]
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
- Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: July 31, 2015

/s/ Barbara A. Edwards

Barbara A. Edwards
Muscarella, Bochet, Edwards & D'Alessandro, P.C.
10-04 River Road
Fair Lawn, NJ 07410
(201)796-3100

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court
District of New Jersey**

In re Donna Yvette Ivery

Debtor(s)

Case No.

Chapter

7

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Donna Yvette Ivery

Printed Name(s) of Debtor(s)

X /s/ Donna Yvette Ivery

Signature of Debtor

July 31, 2015

Date

Case No. (if known) _____

X _____

Signature of Joint Debtor (if any)

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court
District of New Jersey**

In re **Donna Yvette Ivery**

Debtor(s)

Case No.
Chapter

7

VERIFICATION OF CREDITOR MATRIX

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: **July 31, 2015**

/s/ Donna Yvette Ivery

Donna Yvette Ivery

Signature of Debtor

Ace Homeowners Insurance
P.O. Box 1685
616 Idaho Street
Salem, VA 24153

ADT Security Services
P.O. Box 371878
Pittsburgh, PA 15250-7878

Advanced Orthopaedic Associates
1777 Hamburg Turnpike
Suite 301
Wayne, NJ 07470-5243

American Express
P.O. Box 1270
Newark, NJ 07101-1270

American Express
P.O. Box 981537
El Paso, TX 79998

American Housing Alliance
501 General Harris Street
Longboat Key, FL 34228

American Housing Alliance
3317 W. Beverly Boulevard
Suite #202
Montebello, CA 90640

AMI Cardiac Monitoring
AMI Clinical Services
17810 Meeting House Road # 210
Sandy Spring, MD 20860

Amy L. Sauter, Esq.
Pescatore & Sauter
286 Union Street
Hackensack, NJ 07601

Andrew Wubbenhorst
17 Kiel Avenue
Butler, NJ 07405

Aqua Pools, Inc.
44 Central Avenue
Midland Park, NJ 07432

ARS National Services
P.O. Box 463023
Escondido, CA 92046

Atrium Health at Wayne
1120 Alps Road #B
Wayne, NJ 07470

AV Landscaping Services
50 Cottage Street
Midland Park, NJ 07432

Bank of America
P.O. Box 15019
Wilmington, DE 19886-5019

Bank of America
P.O. Box 15714
Wilmington, DE 19886-5714

Bank of America
P.O. Box 982235
El Paso, TX 79998

Bank of America Home Loans
P.O. Box 940335
Simi Valley, CA 93094-0335

Bank of America Home Loans
7105 Corporate Drive
MSN: PTX-C-35
Plano, TX 75024

Barry D. Epstein, Esq.
The Epstein Law Firm
340 West Passaic Street
Rochelle Park, NJ 07662

Bastarrika & Soto
434 21st Avenue
Paterson, NJ 07513

Bergen Gastroenterology
466 Old Hook Road
Suite 1
Emerson, NJ 07630

Body in Motion Sports & Orthopaedics
599 State Hwy 37 W
2nd Floor
Toms River, NJ 08755-8011

Breathewell Corp
1200 East Ridgewood Avenue
Ridgewood, NJ 07450-3957

Capital Bank
1 Church Street
Rockville, MD 20850

Capital One
P.O. Box 30281
Salt Lake City, UT 84130-0281

Capital One
1 South Orange Street
Wilmington, DE 19801

Certified Credit & Collection Bureau
P.O. Box 336
Raritan, NJ 08869

Chase Bank
P.O. Box 15153
Wilmington, DE 19886-5153

Chase Bank
P.O. Box 15298
Wilmington, DE 19850

Chase Bank Customer Service Center
P.O. Box 659732
San Antonio, TX 78265

Chase Cardmember Service
P.O. Box 15153
Wilmington, DE 19886-5153

Chase Cardmember Service
P.O. Box 15548
Wilmington, DE 19886-5548

Chilton Hospital
P.O. Box 824638
Philadelphia, PA 19182-4638

Chilton Memorial Hospital
97 West Parkway
Pompton Plains, NJ 07444

Columbia Dept. of Pediatrics
630 W 168th Street
BHN1-112
New York, NY 10032

Columbia University Medical Center
Trustee's of Columbia University
P.O. Box 27138
New York, NY 10087

Columbia University NI 1224
Trustee's of Columbia University
P.O. Box 27138
New York, NY 10087-7138

Comprehensive Pediatric Care
119 Prospect Street - Suite 2
Ridgewood, NJ 07450

Covenant Reinsurance
46 Basswood Terrace
Wayne, NJ 07470

Daniels & Davis-Daniels, Esqs.
KayKay Davis-Daniels, Esq.
527 Bangs Avenue, Suite 4
Asbury Park, NJ 07712

David Zuidema, Inc.
90 Midland Avenue
Midland Park, NJ 07432

Dianne Thomas, MD, LLC
165 State Street
Suite 2
Hackensack, NJ 07601

Diversified Collection Services, Inc.
P.O. Box 551268
Jacksonville, FL 32255-1268

Diversified Consultants, Inc.
P.O. Box 551268
Jacksonville, FL 32256-1268

Dr. Esha Koshnu
1140 Bloomfield Avenue
West Caldwell, NJ 07006

Dr. Frank MacArthur
9 Post Road #6
Oakland, NJ 07436

Dr. Gilbert Kepecs
385 Prospect Ave # 2
Hackensack, NJ 07601

Dr. Grubez Edeer
Aesthetic Smile Design
246 Hamburg Turnpike - Suite 206
Wayne, NJ 07470

DSNB/Macy's
P.O. Box 8218
Mason, OH 45040

Eastern Christian School Association
50 Oakwood Avenue
North Haledon, NJ 07508-2449

Eastern Christian School Association
Come Stay & Play/After School Care
50 Oakwood Avenue
North Haledon, NJ 07508-2449

Elliot Gourvitz, Esq.
Gourvitz & Gourvitz
505 Morris Avenue, 1st Floor
Springfield, NJ 07081

Emer Phys Assoc North Jersey PC
P.O. Box 740021
Cincinnati, OH 45274-0021

GE Capital Retail Bank
P.O. Box 960061
Orlando, FL 32896-0061

Gourvitz & Gourvitz
505 Morris Avenue
Springfield, NJ 07081

Healing Hands Rehab Inc.
1479 Rpite 23 S, #201
Wayne, NJ 07470

HRRG
P.O. Box 5406
Cincinnati, OH 45273-7942

HRRG
P.O. Box 459080
Sunrise, FL 33345-9080

Internal Revenue Service
P.O. Box 120053
Stop 840F
Covington, KY 41012

Internal Revenue Service
P.O. Box 9021
Holtsville, NY 11742-9021

Jaffe & Asher, LLP
600 Third Avenue
New York, NY 10016-1901

James L. Wyckoff
710 Smoke Hollow Trail
Franklin Lakes, NJ 07417

Janet Porro, Esq.
20 Lincoln Park Road
Pequannock, NJ 07440

JCP&L
P.O. Box 3687
Akron, OH 44309

Jefferson Capital System
16 McLeland Road
Saint Cloud, MN 56303

Jersey Central Power & Light
P.O. Box 16001
Reading, PA 19612-6001

JP Morgan Chase Bank
P.O. Box 659754
San Antonio, TX 78265

Kevin Sisco, Esq.
601 Hamburg Turnpike
Wayne, NJ 07470

Labcorp
P.O. Box 2240
Burlington, NC 27216-2240

Lenscrafters/GEGRB
P.O. Box 960061
Orlando, FL 32896-0061

Lexington Insurance Company
Homeowner's Insurance
P.O. Box 414657
Boston, MA 02241

Livia Eye Center
1 Ridgewood Avenue
Paramus, NJ 07652

LTD Financial Services, LP
7322 Southwest Freeway
Suite 1600
Houston, TX 77074-2053

Macy's
P.O. Box 183083
Columbus, OH 43218-3083

Medical and Hospital Credit Exchange
16 Broad Street - Suite 107
Keyport, NJ 07735

Medical Park Imaging
P.O. Box 1259
Dept #88679
Oaks, PA 19456

Mercedes Benz Financial Services
P.O. Box 5209
Carol Stream, IL 60197-5209

Mercedes Benz Financial Services
Schaumburg RPC-MBFS-5209
1301 E. Tower Road
Schaumburg, IL 60173

Michael Confusione, Esq.
309 Fellowship Road
Suite 200
Mount Laurel, NJ 08054

Morgan & Morgan
P.O. Box 4979
Orlando, FL 32802

MRS Associates
1930 Olney Avenue
Cherry Hill, NJ 08003

National Registered Agents
P.O. Box 927
West Windsor, NJ 08550

Nationstar Mortgage
350 Highland Drive
Lewisville, TX 75067

Network Recovery Services, Inc.
3 Expressway Plaza, Suite 200
Roslyn Heights, NY 11577

Network Recovery Services, Inc.
3 Expressway Plaza
Suite 200
Roslyn Heights, NY 11577-2050

Neurology Group of Bergen County
1200 East Ridgewood Avenue
2nd Floor, East Wing
Suite 208
Ridgewood, NJ 07450-3957

New Jersey Division of Taxation
Fair Lawn Invest. - D
22-08 Route 208 South
Fair Lawn, NJ 07410

New Jersey Victims of Crime Compensation
25 Market Street
7th Floor West Wing
Trenton, NJ 08625

New York Presbyterian
P.O. Box 3475
Toledo, OH 43607-0475

NJ Division of Taxation
Fair Lawn Invest. - D
22-08 Route 208 South
Fair Lawn, NJ 07410

Nordstrom Bank
P.O. Box 79137
Phoenix, AZ 85062-9137

Northland Group, Inc.
P.O. Box 390905
Mail Code F160
Minneapolis, MN 55439

Northwestern Mutual
720 E Wisconsin Ave
Milwaukee, WI 53202

OpenSky
P.O. Box 2711
Omaha, NE 68103-2711

Optimum-Cablevision
P.O. Box 3711378
Pittsburgh, PA 15250

Oradell Animal Hospital
580 Winters Avenue
Paramus, NJ 07652

Orthodontica
43 Yawpo Ave #5
Oakland, NJ 07436

Penncro Associates, Inc.
95 James Way, Suite 113
Southampton, PA 18966-3847

Penncro Associates, Inc.
P.O. Box 1878
Southampton, PA 18966-9998

Pescatore & Sauter, LLC
286 Union Street
Hackensack, NJ 07601

Petron Associates
P.O. Box 5598
Newark, DE 19714

Phelan, Hallinan & Diamond
400 Fellowship Road, Suite 100
Mount Laurel, NJ 08054

Portfolio Recovery Associates
P.O. Box 12914
Norfolk, VA 23541

Portfolio Recovery Associates
120 Corporate Boulevard
Suite 100
Norfolk, VA 23502

Portfolio Recovery Associates, LLC
P.O. Box 12914
Norfolk, VA 23541-1223

Professional Claims Bureau
P.O. Box 28212
New York, NY 10087

Professional Claims Bureau, Inc.
P.O. Box 9060
Hicksville, NY 11802-9060

PSE&G
P.O. Box 14444
New Brunswick, NJ 08906

Quest Diagnostics
P.O. Box 7308
Hollister, MO 65673

Raymour & Flanagan Furniture
P.O. Box 130
Liverpool, NY 13088-0130

Regal Collections
P.O. Box 1038
Fair Lawn, NJ 07410

Ronald Ricci, Joseph Fava
& Brooke Bagley
482 Notch Road
Woodland Park, NJ 07424

Silen SurgiCare Center
1117 Route 46 East
Clifton, NJ 07013

Simons Agency Inc.
4963 Wintersweet Drive 627355
Liverpool, NY 13088

Smart Tuition Processing Center
P.O. Box 11731
Newark, NJ 07101

Smart Tuition Processing Center
P.O. Box 117
Newark, NJ 07101

St. Joseph's Regional Medical Center
P.O. Box 36284
Newark, NJ 07188

State of New Jersey
Division of Taxation
P.O. Box 046
Trenton, NJ 08646-0046

State of New Jersey
P.O. Box 283
Trenton, NJ 08695-0283

State of New Jersey
Division of Taxation
Federal Offset Program
P.O. Box 283
Trenton, NJ 08695-0283

Sunrise Credit Services
P.O. Box 9100
Farmingdale, NY 11735

The CBE Group, Inc.
Payment Processing Center
P.O. Box 2038
Waterloo, IA 50704-2038

The City of Paterson Ambulance Service
155 Market Street
Paterson, NJ 07505

The Credit Pros
60 Park Place
Suite 200
Newark, NJ 07102

The Lehr Law Firm
33 Clinton Road #100
West Caldwell, NJ 07006

The Trustees of Columbia University
P.O. Box 29752
New York, NY 10087-9752

The Trustees of Columbia University
P.O. Box 28212
New York, NY 10087-8212

The Valley Hospital
P.O. Box 18998
Newark, NJ 07191-8998

The Valley Hospital
223 N Van Dien Avenue
Ridgewood, NJ 07450

Township of Wayne
Utility Billing Department
475 Valley Road
Wayne, NJ 07470

Township of Wayne
Tax Office
475 Valley Road
Wayne, NJ 07470

United Recovery Systems, LP
P.O. Box 722929
Houston, TX 77272-2929

Verizon
P.O. Box 4830
Trenton, NJ 08650-4830

Verizon
P.O. Box 408
Newark, NJ 07101-0408

Verizon Wireless
500 Technology Drive, Suite 550
Weldon Spring, MO 63304

Verizon Wireless
P.O. Box 25505
Lehigh Valley, PA 18002-5505

Verizon Wireless
P.O. Box 49
Lakeland, FL 33802

Weichert Realtors
991 Hamburg Turnpike
Wayne, NJ 07470

Weinberg, Lieberman & Co
155 Passaic Street
Suite 420
Fairfield, NJ 07004

Wells Fargo
P.O. Box 6995
Portland, OR 97228

Fill in this information to identify your case:

Debtor 1 Donna Yvette Ivery

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of New Jersey

Case number _____
(if known)

Check one box only as directed in this form and in Form 22A-1Supp:

- ☒ 1. There is no presumption of abuse
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 22A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 22A - 1 Chapter 7 Statement of Your Current Monthly Income

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 22A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☒ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>1,625.00</u>	\$ _____
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>5,856.00</u>	\$ _____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ _____
5. Net income from operating a business, profession, or farm		
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from a business, profession, or farm	\$ <u>0.00</u> Copy here ->	\$ _____
6. Net income from rental and other real property		
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from rental or other real property	\$ <u>0.00</u> Copy here ->	\$ _____
7. Interest, dividends, and royalties	\$ <u>0.00</u>	\$ _____

Debtor 1 **Donna Yvette Ivery**

Case number (if known)

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8. Unemployment compensation	\$ 0.00	\$
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:		
For you	\$ 0.00	
For your spouse	\$	
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$ 0.00	\$
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.		
10a.	\$ 0.00	\$
10b.	\$ 0.00	\$
10c. Total amounts from separate pages, if any.	+ \$ 0.00	\$
11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ 7,481.00	+ \$ 7,481.00 = \$ 7,481.00
		Total current monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11 Copy line 11 here=> 12a. \$ **7,481.00**

Multiply by 12 (the number of months in a year)

x 12

12b. The result is your annual income for this part of the form 12b. \$ **89,772.00**

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live. NJ

Fill in the number of people in your household. 3

Fill in the median family income for your state and size of household. 13. \$ **90,863.00**

14. How do the lines compare?

14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 22A-2.* Go to Part 3 and fill out Form 22A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Donna Yvette Ivery

Donna Yvette Ivery
Signature of Debtor 1

Date **July 31, 2015**
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 22A-2.

If you checked line 14b, fill out Form 22A-2 and file it with this form.